

Please type a plus sign (+) inside this box →

PTO/SB/08A (08-00)

Approved for use through 10/31/2002, OMB 0651-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet

1

of

1

Complete if Known	
Application Number	Not yet known
Filing Date	July 16, 2003
First Named Inventor	Burson et al.
Group Art Unit	Not yet known
Examiner Name	Not yet known

Attorney Docket Number 01-7083

### U.S. PATENT DOCUMENTS

Examiner Initials'	Cite No. <sup>1</sup>	U.S. Patent Documents		Name of Patentee or Applicant Of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number	Kind Code <sup>2</sup> (if known)			
AA	5,664,973			Emmert et al.	09-09-1997	
AB	6,049,192			Kfouri et al.	04-11-2000	
AC	6,049,725			Emmert et al.	04-11-2000	
AD	5,457,609			Bhanot et al.	10-10-1995	
AE						
AF						
AG						
AH						
AI						
AJ						
AK						
AL						
AM						
AN						
AO						
AP						
AQ						
AR						
AS						
AT						

### FOREIGN PATENT DOCUMENTS

Examiner Initials'	Cite No. <sup>1</sup>	Foreign Patent Document			Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Office <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)				
AU								<input type="checkbox"/>
AV								<input type="checkbox"/>
AW								<input type="checkbox"/>
AX								<input type="checkbox"/>
AY								<input type="checkbox"/>
AZ								<input type="checkbox"/>
BA								<input type="checkbox"/>
BB								<input type="checkbox"/>
BC								<input type="checkbox"/>
BD								<input type="checkbox"/>

Examiner Signature	Date Considered
--------------------	-----------------

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Unique citation designation number. <sup>2</sup> See attached Kinds of U.S. Patent Documents. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.